



Magnolia Spring Classic
Georgia National Fairgrounds ~ Perry, GA
April 17-19, 2026



| | | | | | | | | | | |
|----------------|--------------------|----------|-------|--------------|--|-------------------------------|-------|--|-------------------|--|
| Horse's Name | | Reg. No. | | DOB MM/DD/YY | | Sex | | Color | | |
| Sire | | | Dam | | | Horse USEF ID# | | Horse USDF # | | |
| Rider 1 | Class Numbers | | | | | | | | TOTAL FEES | |
| | Entry Fees | | | | | | | | \$ | |
| Name | | | | DOB MM/DD/YY | | Amateur Certificate Yes No | | Rider's Relationship to horse owner(s) for owner classes | | |
| GVHS# | | | USEF# | | | USDF# | | | WDAA# | |
| Address | | | | City | | | State | | Zip | |
| Rider 2 | Classes / Sections | | | | | | | | TOTAL FEES | |
| | Entry Fees | | | | | | | | \$ | |
| Name | | | | DOB MM/DD/YY | | Amateur Certificate Yes No | | Rider's Relationship to horse owner(s) for owner classes | | |
| GVHS# | | | USEF# | | | USDF# | | | WDAA# | |
| Address | | | | City | | | State | | Zip | |
| Rider 3 | Classes / Sections | | | | | | | | TOTAL FEES | |
| | Entry Fees | | | | | | | | \$ | |
| Name | | | | DOB MM/DD/YY | | Amateur Certificate Yes No | | Rider's Relationship to horse owner(s) for owner classes | | |
| GVHS# | | | USEF# | | | USDF# | | | WDAA# | |
| Address | | | | City | | | State | | Zip | |

Each person signing this entry form acknowledges that he/she has read the front and reverse of this Entry Form and agrees to the applicable terms, conditions, waivers
Minor entrants must also have parent/guardian signature(s) on the back., releases, indemnification and consent as set forth herein. Each person agrees that the information is accurate to the best of his/her knowledge.

THE FOLLOWING MUST BE SENT WITH YOUR ENTRIES
Copies of AHA, USEF, Membership cards for each Rider/Driver/Handler/Coach/Trainer/Owner,
Horses Registration Papers & Current Required Health Documents.

OWNER INFORMATION Owner name as it appears on registration papers/purchase contract

Name _____

If Joint owner check one: Non Related Co Owner Related – What is the Relationship? _____

GVHS# _____ USEF# _____

USDF# _____ WDAA# _____ AQHA# _____

Current Address _____ Phone _____

City _____ ST _____ Zip _____

Email _____

TRAINER INFORMATION (must be filled out, if there is no trainer, the person responsible for the horse at the show)

Name _____

GVHS# _____ USEF# _____

USDF# _____ WDAA# _____ AQHA# _____

Address _____ Phone _____

City _____ ST _____ Zip _____

Email _____

ADDITIONAL INFORMATION

Send Acknowledgement to Owner Trainer Both

Email Acknowledgement to (Print) _____

Stable with _____

Total Entry Fees ----- \$ _____

1 Horse Stall (Wed-Sun no bedding) ----- \$ 150.00

1 GVHS Concurrent Judges Fee ----- \$ 25.00

1 GVHS Drug Fee ----- \$ 20.00

1 Office Fee ----- \$ 30.00

1 EMT Fee ----- \$ 10.00

_____ Tack Stalls (Wed-Sun) @ \$150 ----- \$ _____

_____ Shavings @ \$9 bag (no outside bedding) - \$ _____

Other Fees

_____ Post Entry Fee \$40 (at show) ----- \$ _____

_____ Post Entry Fee \$30 (after 4/3 online) ----- \$ _____

_____ Green Fee (not entering online) \$10 ----- \$ _____

TOTAL FEES DUE ----- \$ _____

Office use

Check or CC auth _____

Total _____

Due/Refund _____

Post Mark Date _____

ENTRIES CLOSE – April 3, 2026
Make Checks payable to MAHA, Inc.
Mail to: Lindsey Hager
3188 NW 66th Blvd., Jennings, FL 32053
Online Entries available on RingRadar.com

ALL ENTRY FORMS MUST BE PROPERLY SIGNED BACK SIDE